	UTILITY		A 44						
		y Docket No.		P100-145A		Total Pages	2		
PATENT APPLICATION			First Named Inventor or Application Identifier: AURELIO PIANCIOLA, et al Title: PUMPING METHOD AND UNIT FOR OPTICAL AMPLIFIERS						
TRANSMITTAL								PLIFIERS	
(Only for new nonor	rovisional applications under 37	CER 81 52/6))	Express	Mail Label No.		EV32718972	BUS		3 3
									<u>"CC</u>
I hereby certify that this States Postal Service " under 37 CFR 1.10 on t Stop Patent Applicatio Alexandria, VA 22313-	19,2003	ed with the United Addressee" service Addressed to Mail P.O. Box 1450,		AD	DRESS 1	70: Cor P.C	nmissioner). Box 1450	nt Application of Patents 22313-1450	03945 U.S 10/6434
Signature Sov	ally Gagle ling Label No. EV327189728 US	1			•				
1. Submit an o	mittal Form priginal and a duplicate for fee p	rocessing)		5.	Mic	crofiche Comp	outer Progra	m (Appendix)	· · · · · · · · · · · · · · · · · · ·
Specification		[Total Pages	35	6. Nucl (if a _l	leotide ar oplicable,	nd/or Amino A all necessar	cid Sequen	ce Submission	
	title of the Invention rences to Related Applications			a.		Computer R		ру	
	Regarding Fed sponsored R&D to Microfiche Appendix			b.		Paper Copy	(identical to	computer copy)	
- Brief Summ	d of the Invention nary of the Invention			C.		Statement v	erifying iden	tity of above copi	es
- Brief Descri	iption of the Drawings (if filed)			ACCOM	PANYIN	G APPLICAT	ION PARTS	3	· · ·
- Detailed De	escription			7.	Ass	signment Pap	ers (cover s	heet & document	(s))
Claim(s)Abstract of	the Disclosure			8.		C.F.R. § 3.73 hen there is a		nt Powe	r of Attorney
3. Drawing(s) (3	35 U.S.C. § 113)	[Total Sheets	8	9.	Eng	glish Translati	ion Docume	nt (if applicable)	
Oath or Declaration	n	[Total Pages	2	10.		ormation Disc Itement (IDS)		Copie Citatio	s of IDS ons
a. Execut	ed (original or copy)			11.	Pre	eliminary Ame	ndment		
b. Copy fr (for cor	rom a prior application (37 C.F.f ntinuation/divisional with Box 16	R. § 1.63(d)) completed)		12.		turn Receipt F ould be speci		-	
	ELETION OF INVENTOR(S)			14.		rtified Copy of	-	Other:	
	igned statement attached deleting in pplication, see 37 C.F.R. §§ 1.63(d)		ior		Pric	ority Documer oreign priority	nt(s)	Ouler.	
16. If a CONTINUING	APPLICATION, check appropri	rioto have and avantuth	o romuio	ita information b		imed)			
Continuation Prior application in	☐ Divisional.	tinuation-in-part (CIP) o	f prior a					ent:	
	N or DIVISIONAL APPS only: The				nich an oa	th or declarati	ion is suppli	ed under Roy 4h	
is considered as be	ing part of the disclosure of the a	accompanying continuati	on or div	isional application	on and is	hereby incorp	orated by		
reference. The inco	prporation can only be relied upor					ubmitted appli	cation parts		
		17. CORRES	PONDE	NCE ADDRESS	٠,			<u> </u>	
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NAME	U.P. Peter Eng, Esq. Will	son Sonsini, Goodr	ich & F	Rosati					
ADDRESS	650 Page Mill Road								
CITY	Palo Alto	STATE	CA			ZIP CO	DE !	94304-10560	
COUNTRY	USA	TELEPHONE	650-4	93-9300	.,	FAX		650-493-6811	
Name (Print/Type)	Ronald J. Paglierani	\circ		Registration				29,201	
Signature	Konoldet	Haglers	w		Date	AUG	UST 1	9, Z003	

FEE TRANSMITTAL for FY 2003

FOTAL AMOUNT OF PAYMENT (\$)750.00

Complete if Kn wn					
Application Number	To Be Assigned				
Filing Date	Herewith				
First Named Inventor	AURELIO PIANCIOLA, et al.				
Examiner Name	To Be Assigned				
Group / Art Unit	To Be Assigned				
Attorney Docket Number	PI00-145A				

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)						
1. 🔀 The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES						
indicated fees and credit any overpayments to:	Large Entitly						
Deposit Account 03-3325	Fee Fee Fee Description Fee Paid						
Number	Code (\$)						
	1051 130 Surcharge - late filing fee or oath						
Account Name Corning Incorporated	1052 50 Surcharge - late provisional filing fee or cover sheet						
Charge Any Additional Fees Required	1053 130 Non-English specification						
Under 37 C.F.R. §§ 1.16 and 1.17	1812 2,520 For filing a request for reexamination						
2. Payment Enclosed:	1804 920* Requesting publication of SIR prior to						
☐ Check ☐ Money Order ☐ Other FEE CALCULATION	Examiner action						
1. BASIC FILING FEE	1805 1,840 Requesting publication of SIR after Examiner action						
Large Entitly Fee Fee Fee Description Fee Pai	id 1251 110 Extension for reply within first month						
Code (\$)	1252 410 Extension for reply within second month						
	1253 930 Extension for reply within third month						
1001 750 Utility filing fee <u>750.00</u>							
1002 330 Design filing fee	1255 1,970 Extension for reply within fifth month						
1003 520 Plant filing fee	1401 320 Notice of Appeal						
1004 750 Reissue filing fee	1402 320 Filing a brief in support of an appeal						
1005 160 Provisional filing fee	1403 280 Request for oral hearing						
SUBTOTAL (1) (\$)750.00							
2. EXTRA CLAIM FEES	1452 110 Petition to revive - unavoidable						
Extra Fee from Claims below Fee Paid	1453 1,300 Petition to revive - unintentional						
Total Claims 1 - 20** = x 18 = 00.00	1501 1,300 Utility issue fee (or reissue)						
Independent 1 - 3** = x 84 = 00.00	1502 470 Design issue fee						
Claims	1503 630 Plant issue fee						
Multiple Dependent 0 = 0.00	1460 130 Petitions to the Commissioner						
**or number previously paid, if greater; For Reissues, see bek	1807 50 Petitions related to provisional applications						
Large Entity	1806 180 Submission of Information Disclosure Stmt						
Fee Fee Fee Description Code (\$)							
1202 18 Claims in excess of 20	8021 40 Recording each patent assignment per property (times number of properties)						
1201 84 Independent claims in excess of 3	1809 750 Filing a submission after final rejection						
1203 280 Multiple dependent claim, if not paid	(37 C.F.R. § 1.129(a))						
1204 84 ** Reissue independent claims over original patent	1810 750 For each additional invention to be examined (37 C.F.R § 1.129(b))						
1205 18 ** Reissue claims in excess of 20 and over original patent	1801 750 Request for Continued Examination (RCE) 1802 900 Request for expedited examination of a design application						
SUBTOTAL (2) (\$)00.00	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						
SUBMITTED BY	Completed (if applicable)						
Name (Print/Type) Ronald J. Paglierani	Registration No. (Attorney/Agent) 29,201						
Signature Ronall J	aglierane Date AUG. 19, 2003						